

## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY - REGION 2

Division of Enforcement & Compliance Assistance - Air Compliance Branch (DECA-ACB)

290 Broadway - 21st Floor New York, NY 10007-1866



NOTIFICATION OF DEMOLITION AND RENOVATION Postmark **Date Received** Notification Operator Project # 93673 I. TYPE OF NOTIFICATION (O = Original / R = Revised / E = Emergency/C = Cancelled) : ORIGINAL II. FACILITY INFORMATION ( Identify owner, removal contractor, and other operator) OWNER NAME: NEW YORK POWER AUTHORITY Address: 830 BARNHART ISLAND RD. State: NY ZIP: 13662 City: MASSENA Tel:315-764-6850 Contact: JON MAYETTE REMOVAL CONTRACTOR: OP-TECH ENVIRONMENTAL SERVICES, INC. d/b/a NRC Environmental Services Address: 63 TRADE RD. State: NY ZIP: 13662 City: MASSENA Tel: 315-764-1917 Contact: GUY GRIFFIN OTHER OPERATOR: Address: ZIP: State: City: Tel: Contact: III. TYPE OF OPERATION ( D = Demolition / O = Ordered Demolition/R = Renovation/E = Emergency) : RENOVATION IV. IS ASBESTOS PRESENT? (Yes/No): YES V. FACILITY DESCRIPTION (include building name, number and floor or room number): Building Name: ST. LAWRENCE / FDR POWER DAM Address: 830 BARNHART ISLAND RD. County: ST. LAWRENCE City: MASSENA State: NY Site Location: G.S.U. TRANSFORMERS, BANK # 6 Age in Years: Building SqMeter: SqFt: # of Floors: 60 +/-100000 Prior Use: HYDRO Present Use: HYDRO VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL: >AIR SAMPLING-ANALYTICAL, BULK SAMPLING-ANALYTICAL

VII. APPROXIMATE OF RACM TO BE REMOVED AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED. SPECIFY THE AMOUNT OF ASBESTOS BELOW:  1. Regulated ACM to be removed 2. Category I ACM not removed 3. Category II ACM not removed	RACM to be removed	Non-friable Asbestos Material not to be removed		Indicate Unit of Measurement below	
		Cat I	Cat II	UNIT	
Pipes - Linear Feet	33	150	ESTATE OF THE	LnFt:	Ln M:
Surface Area - Square Feet	0 238 132	N TO BEEN T	6	SqFt:	Sq M:
Volume RACM off Facility Component		3 10 10		CuFt:	Cu M:
VIII. SCHEDULED DATES OF ASBESTOS REMOVAL: (MM/DD/YY) Start: 10/3/2016	Со	mpletion: 10	/31/2016	i de la composition della comp	an an open
IX. SCHEDULED DATES OF DEMOLITION/RENOVATION: (MM/DD/YY) Start: N/A	Comp	letion: N/A		Wild by	



X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WO	N AND RENOVATION (continued) RK, AND METHOD(S) TO BE US	ED: ORIG		
-NAMOIAU K.A				
XI. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTRACTOR ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: >NEG. PRESSURE 2-LAYER TENT ENCLOSURE, WET METHODS, SIN				
XII. WASTE TRANSPORTER#1				
Name: OP-TECH ENVIRONMENTAL SERVICES, INC. d/b/a NRC Enviro	nmental Services			
Address: 63 TRADE RD.				
City: MASSENA	State: NY	ZIP: 13662		
Contact Person: GUY GRIFFIN	Telephone: 315-764-19	17		
WASTE TRANSPORTER #2	20年2月2日1日1日1日			
Name:				
Address:				
City:	State:	ZIP:		
Contact Person:	Telephone:			
XIII. WASTE DISPOSAL SITE				
Name: COUNTY OF FRANKLIN SOLID WASTE MANAGEMENT AUTHO	RITY			
Address: 828 COUNTY RT. 20				
City: CONSTABLE	State: NY	ZIP: 12926		
Telephone: 518-483-8270				
XIV. IF DEMOLITION IS ORDERED BY A GOVERNMENT AGENCY, PLE	ASE IDENTIFY THE AGENCY E	BELOW		
Name:	Title:			
Authority:				
Date if Order (MM/DD/YY):	Date Ordered to Begin (MM/DD/YY) :			
XV. FOR EMERGENCY RENOVATIONS				
Date and Hour of Emergency (MM/DD/YY): N/A				
Description of the Sudden, Unexpected Event: N/A				
Explanation of How the event caused unsafe conditions or would cause $N/A$	e equipment damage or an unro	easonable financial burden:		
XVI. DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVEN PREVIOUSLY NON-FRIABLE ASBESTOS BECOMES CRUMBLED, PUSAMATERIAL WILL BE WET WITH AMENDED WATER; REMOVAL BY WET MAY WORK AREA.	JLVERIZED, OR REDUCED TO	POWDER:		
XVII. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOT HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE (Required 1 year after promyligation)	VATION AND EVIDENCE THAT	THE REQUIRED TRAINING		
GUY P. GRIFFIN / NRC	September 19, 2016			
Signature of Owner/Operator	Date			
XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT. GUY P. GRIFFIN / NRC	September 19, 2016			
Signature of Owner/Operator	Date			
RenoDemoForm_2010.doc				